

<b>PARTICIPANT TYPE.....ALL</b>
<b>HIGH RISK.....YES</b>

**RISK DESCRIPTION:**

Any renal disease including pyelonephritis and persistent proteinuria, but excluding urinary tract infections (UTI) involving the bladder.

Presence of renal disease diagnosed by a physician as self-reported by applicant, participant, or caregiver; or as reported or documented by a physician, or someone working under physician's orders

**ASK ABOUT:**

- Attitude and knowledge about condition and treatment plans including diet and medications
- Dietary supplements including vitamins, minerals, herbal products and targeted nutrition therapy products
- Food-medication interactions
- Barriers to following treatment plan (e.g., health beliefs, religious or cultural practices, finances, access to follow-up health care)
- Growth pattern (children)
- Pregnancy weight gain pattern (pregnant women)
- Weight goal

**NUTRITION COUNSELING/EDUCATION TOPICS:**

- Pregnant Women:
  - Fetal growth is often limited in pregnant women with renal disease.
  - There is a high risk of developing a preeclampsia-like syndrome.
- All Women:
  - Women with chronic renal disease often have proteinuria with risk of azotemia. (A medical condition characterized by abnormal levels of nitrogen-containing compounds, such as urea, creatinine, various body waste compounds, and other nitrogen-rich compounds in the blood. It is largely related to insufficient filtering of blood by the kidneys if protein intake remains too high.)
- Infants and Children:
  - Renal disease can result in growth failure.

## **NUTRITION COUNSELING/EDUCATION TOPICS (CON'T):**

- All Participants:
  - Identify WIC foods that are consistent with the treatment plan.
  - Encourage regular physical activity as advised by the primary care provider.
  - Determine and discuss an eating pattern appropriate for the participant's weight goal (i.e., maintain, gain or lose weight) and categorical status.
  - Provide counseling messages that support medical nutrition therapy initiated by a clinical dietitian.

## **POSSIBLE REFERRALS:**

- If the participant requires in-depth nutritional intervention beyond the scope of WIC services, refer to primary care provider or a dietitian with expertise in this area of practice.
- If the participant is taking any non-prescribed vitamin or mineral supplements, herbal supplements, or targeted nutrition therapy products, advise discussing these with the primary care provider.
- If the participant does not have an ongoing source of health care, refer to primary care providers in the community or the local public health department.
- Depending on the type of renal disease, you may be able to refer infants and children to the Children's Special Health Services program (<http://www.ndhealth.gov/cshs/>).